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## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)

559412000200

In re Application of Dolores SCHENDEL et al.

Application Number  
10/665,111Filed  
September 16, 2003For: SEMI-ALLOGENIC ANTI-TUMOUR VACCINE WITH HLA HAPLO-  
IDENTICAL ANTIGEN-PRESENTING CELLS

Art Unit 1645

Examiner Not Yet Assigned

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$ |        |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$ |        |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ | 950.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$ |        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$ |        |

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 475.00☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952

I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

I am the ☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).☒ attorney or agent of record. Registration Number 37,341☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a)

May 4, 2004

Date

(650) 813-5777

Telephone Number

Signature

Carol M. Gruppi

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☒ Total of 1 forms are submitted.

05/07/2004 SSESHE1 00000065 031952 10665111

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